

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF LOUISIANA

**INSTRUCTIONS FOR COMPLETION OF PETITION FOR ADMISSION**

The attached Petition for Admission must be typewritten or printed legibly.

The Clerk should also be furnished with a **CURRENT** (dated within the last six months), **ORIGINAL** Certificate of Good Standing from the Clerk of the **SUPREME COURT OF THE STATE OF LOUISIANA** (must have the Court seal).

The two (2) attorneys that sign your petition **MUST** be a member of the Western District of Louisiana Bar.

We also require that you supply us with your Louisiana Bar Number.

REMIT check in the amount of \$75.00 with your application. Check should be made payable to "Clerk, U. S. District Court".

NO APPEARANCE IS NECESSARY OR REQUIRED.

If you should have any questions, please contact Stephanie Alvarez, Jury Administrator, at 318-676-4228.

In summary, to be admitted send:

- 1.) Completed Petition for Admission
- 2.) Completed "Written Oath for Admission to Practice"
- 3.) Certificate of Good Standing from LA Supreme Court
- 4.) Authorization Notice for Facsimile Transmission
- 5.) Seventy-five (\$75.00) Dollars

to

Clerk, United States District Court  
Attention: Jury Administrator  
300 Fannin Street, Suite 1167  
Shreveport, LA 71101

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF LOUISIANA**

# PETITION FOR ADMISSION

Under the provisions of ULLR Rule 20, the undersigned attorney petitions the Court for admission to practice before this Court representing as follows:

NAME : \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

HOME ADDRESS: \_\_\_\_\_  
(Street or P. O. Box)

\_\_\_\_\_  
 (CITY) (ZIP CODE) (PARISH)

HOME  
TELEPHONE: \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ STATE BAR IDENTIFICATION NO. \_\_\_\_\_  
(State Bar ID # Is Required)

NAME OF FIRM: \_\_\_\_\_  
OFFICE \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
(Street or P. O. Box)

(CITY) (ZIP CODE) (PARISH)

OFFICE  
TELEPHONE:                      FAX #:                      (include area code)

MY higher educational background is as follows:

SCHOOL	YEARS (dates)	DEGREE

In addition to the bar of the Louisiana Supreme Court, I am admitted to practice before the following Courts:

COURT	DATE OF ADMISSION

I have never been disbarred nor suspended from practice before any Court, department, bureau, commission or other body of the any state of the United States, nor have I received any reprimand from any such Court or other body, except as follows: \_\_\_\_\_

I am qualified to practice before this Court and am not subject to any pending disbarment or professional discipline procedure in any Court, except as follows: \_\_\_\_\_

I have read in their entirety the Federal Rules of Civil Procedure, the Federal Rules of Criminal Procedure, the Federal Rules of Evidence, the Code of Professional Responsibility, and the Local Rules for the Western District of Louisiana. I will follow and apply such rules before this Court.

SIGNED: \_\_\_\_\_

STATE OF LOUISIANA  
PARISH OF \_\_\_\_\_

BEFORE ME, the undersigned Notary Public, came and appeared \_\_\_\_\_, who after being duly sworn, did depose and say that all the allegations made in the above Petition for Admission are true and correct to the best of his/her knowledge.

\_\_\_\_\_  
Petitioner

THUS DONE AND PASSED, before me, Notary Public, this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_, Louisiana.

\_\_\_\_\_  
Notary Public

#### ENDORSEMENT

I am admitted to practice before this Court and am familiar with \_\_\_\_\_. I have read the Petition for Admission, and it is true to the best of my knowledge and belief. Petitioner is of good moral character and is qualified to practice before this Court.

Signed \_\_\_\_\_

Name \_\_\_\_\_  
(Type or Print)

Date \_\_\_\_\_ LA # \_\_\_\_\_

Signed \_\_\_\_\_

Name \_\_\_\_\_  
(Type or Print)

Date \_\_\_\_\_ LA # \_\_\_\_\_

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF LOUISIANA

WRITTEN OATH FOR ADMISSION TO PRACTICE

I DO SOLEMNLY SWEAR (OR AFFIRM) that I will support the Constitution of the United States; that I will well and faithfully discharge my duties as attorney and officer of this Court; and that I will demean myself uprightly and according to law and the recognized standards of ethics of the legal profession. I do further solemnly swear (or affirm) that I have read the Federal Rules of Civil Procedure, the Federal Rules of Criminal Procedure, the Federal Rules of Evidence, and the Uniform Local Rules of the United States District Court for the Western District of Louisiana and that I am fully prepared to use and abide by them in my practice before this Court. SO HELP ME GOD.

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Signature of Applicant

STATE OF LOUISIANA, PARISH OF \_\_\_\_\_

Before me, the undersigned authority, personally came and appeared \_\_\_\_\_, to me personally known, who, being by me first duly sworn, did depose and say that the above and foregoing answers and statements were made by him or her and that they are true and correct.

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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Notary Public

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF LOUISIANA

**AUTHORIZATION TO SEND ORDERS AND  
JUDGMENTS BY FACSIMILE TRANSMISSION**

The United States District Court for the Western District of Louisiana is pleased to announce that we are now able to transmit notice of this court's judgments and orders via facsimile transmission. The obvious benefit of this technology is that you will usually receive your copy of a judgment or order the same day it is signed.

To take advantage of fax noticing for all Western District cases, please complete the bottom portion of this page and return it with your petition for admission. If you should have any questions about this program, please call this office at 318-676-4273.

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The Clerk of Court for the Western District of Louisiana is authorized to transmit notice of entry of judgment or orders under Fed.R.Civ.P. 77, and Fed.R.Crim.P. 49 by facsimile transmission of judgments, orders or notices in any case in which this capability exists, and the undersigned appears as attorney in charge. I understand that this electronic notice will be in lieu of notice by mail required by the above referenced Federal Rules. The following telephone number is dedicated for facsimile transmission.

\_\_\_\_\_ YES, I wish to participate in facsimile transmission  
\_\_\_\_\_ NO, I do not wish to participate in facsimile transmissions.  
IF YES, please list your FAX phone number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant